



DW

Applicant Name: _____ **Date Prepared:** _____
DWSRF Project No.: _____ **PWSID No.:** _____

**APPLICATION CHECKLIST
 PUBLICLY-OWNED SYSTEMS
 NEW YORK DRINKING WATER STATE REVOLVING FUND**

This document lists all of the items which form a complete Drinking Water State Revolving Fund (DWSRF) application. A summary of these items can be found in the Description of Application Components. Please review the Checklist with EFC at the beginning of the application process since all items may not apply to your project. This Checklist should be used to verify that your application package is complete. The completed Checklist must be submitted to EFC as part of the application package. The application package documents are also available on the EFC website at www.nysefc.org (Click on "Programs", then "Drinking Water State Revolving Fund", then "Application Process").

PART 1

The items in Part I must be submitted by the applicant in order to have a complete application. Check the appropriate boxes below. If these items have already been submitted, please indicate.

No.	Item	Submitted Earlier	Submitted with this Application	Contacts (for more information)
1.	Application Form *	<input type="checkbox"/>	<input type="checkbox"/>	Finance
2.	Resolution Authorizing DWSRF Application and Agreement for Project Financing*	<input type="checkbox"/>	<input type="checkbox"/>	Finance
3.	Municipal Bond Resolution(s)			
	a) Bond Resolutions (Certified Copy)	<input type="checkbox"/>	<input type="checkbox"/>	Legal
	b) Proof of Publication of Permissive Referendum (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	Legal
	c) Proof of Publication of Estoppel Notice	<input type="checkbox"/>	<input type="checkbox"/>	Legal
4.	Engineering/Technical Report	<input type="checkbox"/>	<input type="checkbox"/>	Engineering
5.	Department of Health's Approval of Engineering/Technical Report	<input type="checkbox"/>	<input type="checkbox"/>	Engineering
6.	Environmental Review Documents and Findings (SERP) [†] ;	<input type="checkbox"/>	<input type="checkbox"/>	Engineering
	Environmental Review Questionnaire*	<input type="checkbox"/>	<input type="checkbox"/>	Engineering
7.	Minority and Women's Business Enterprise - Equal Employment Opportunity Program Documents [†]			
	a) Work Plan (Policy Statement, Officer, Goals)*	<input type="checkbox"/>	<input type="checkbox"/>	Program Management
	b) Project Description*	<input type="checkbox"/>	<input type="checkbox"/>	Program Management

* Form included in Application Package.

[†] Guidance/Questionnaire included in Application Package.

No.	Item	Submitted Earlier	Submitted with this Application	Contacts (for more information)
8.	Financial Information			
a)	Current Adopted Capital and Operating Budgets	<input type="checkbox"/>	<input type="checkbox"/>	Finance
b)	For Applicants other than counties, cities, towns and villages, financial statements (audited if available) for the three (3) most recent fiscal years.	<input type="checkbox"/>	<input type="checkbox"/>	Finance

PART II

The nature of the applicant's project will determine if the following items are required for a complete application. Please call EFC to discuss whether the following items apply. Check the appropriate boxes below.

No.	Item	Submitted Earlier	Submitted with this Application	Not Applicable	Contacts (for more information)
9.	Capacity Development Form* (for small community water systems)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Engineering
10.	Plans and Specifications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Engineering
11.	Department of Health's Approval of Plans and Specifications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Engineering
12.	Permits and Other Regulatory Approvals (submit to DOH)				
a)	DOH Permit Status Checklist*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Engineering
b)	DEC Permit Screening Form*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Engineering
c)	OPRHP / SHPO Project Review Checklist*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Engineering
d)	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Engineering
e)	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Engineering
13.	Certification as to Title to Project Site *	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Legal
14.	Engineer's Certification of Technical Requirements *	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Engineering
15.	Consolidation Plan, Agreements and Approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Engineering
16.	Lease Agreement to Project Site	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Legal
17.	Municipal Service Agreements				
a)	Intermunicipal Agreements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Legal
b)	Private Operating Agreements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Legal
c)	Private Use Agreements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Legal
18.	Force Account Proposal(s) †				
a)	Technical	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Engineering
b)	Administrative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Engineering

*

Form included in Application Package.

† Guidance included in Application Package.

No.	Item	Submitted Earlier	Submitted with this Application	Not Applicable	Contacts (for more information)
19.	Agreements for Professional Services				
a)	Engineering Planning Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Engineering
b)	Engineering Design Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Engineering
c)	Engineering Construction Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Engineering
d)	Local Counsel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Finance
e)	Bond Counsel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Finance
f)	Financial	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Finance
g)	Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Finance
20.	Executed Construction Contracts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Engineering
21.	M/WBE Utilization Plan (for executed construction contracts)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Engineering
22.	Notice to Proceed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Engineering
23.	Certification of Project Completion*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Engineering
24.	Prefinancing/Co-Funding Documentation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Engineering
25.	Other Financial Information				
a)	Applicant's Official Statement or other offering document for most recent debt issuance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Finance
b)	Applicant's <u>Annual</u> Financial Reports submitted to the Office of the State Comptroller for the three (3) most recent fiscal years, only if requested	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Finance
c)	Applicant's <u>Audited</u> Financial Reports for the three (3) most recent fiscal years	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Finance
d)	Submittal to Office of the State Comptroller for Improvement District formation, if submitted within the last two (2) years	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Finance
e)	Financial Reports for the <u>System</u> for the three (3) most recent fiscal years (if available)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Finance
26.	For refinancing of existing debt, please attach the following supporting documents as applicable:				
a)	Municipal Resolution Authorizing Debt (Original)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Finance
b)	Bond Anticipation Note (BAN)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Legal
c)	Opinion Of Bond Counsel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Legal
d)	Official Statement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Finance
e)	Refunding Resolution (Copy)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Legal
f)	Proof of Publication of Estoppel Notice for Resolution	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Legal
g)	Cost Documentation (Refinancing)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Finance
h)	Statement Specifying Net Interest Earned Or Anticipated	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Finance
27.	For Reimbursement of Interfund Borrowings:				
a)	Municipal Interfund Borrowing Resolution (Copy)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Legal
b)	Cost Documentation (Interfund Borrowings)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Finance

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